


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

 Substitution of form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)		Complete if Known	
Application Number		10/606,504	
Filing Date		June 26, 2003	
First Name Inventor		James P. Peterson	
Group Art Unit		1774	
Examiner Name		Betelhem Shewareged	
Attorney Docket Number		200920-9007	

[illegible]

Examiner Signature		Date Considered	02/2006
--------------------	---	-----------------	---------

**EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

**Burden Hour Statement:** This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 0231.

**DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box Alexandria, VA 22313-1450.**